

B6 Summary (Official Form 6 - Summary) (12/14)

**United States Bankruptcy Court**  
**Eastern District of North Carolina - Wilmington Division**

In re **Barry A. Moore,**  
**Doris T. Moore**

Case No. 15-01059-5-SWH

Debtors

Chapter 11

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS       | LIABILITIES  | OTHER     |
|--|----------------------|------------------|--------------|--------------|-----------|
| A - Real Property  | Yes                  | 1                | 1,020,000.00 |              |           |
| B - Personal Property  | Yes                  | 4                | 220,467.00   |              |           |
| C - Property Claimed as Exempt   | Yes                  | 4                |              |              |           |
| D - Creditors Holding Secured Claims   | Yes                  | 3                |              | 3,607,889.23 |           |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 3                |              | 261,919.02   |           |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 8                |              | 1,535,346.68 |           |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |              |              |           |
| H - Codebtors  | Yes                  | 2                |              |              |           |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 2                |              |              | 17,395.47 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 2                |              |              | 18,855.14 |
| Total Number of Sheets of ALL Schedules  |                      | 30               |              |              |           |
| Total Assets   |                      |                  | 1,240,467.00 |              |           |
| Total Liabilities  |                      |                  |              | 5,405,154.93 |           |

B 6 Summary (Official Form 6 - Summary) (12/14)

**United States Bankruptcy Court**  
**Eastern District of North Carolina - Wilmington Division**

In re **Barry A. Moore,**  
**Doris T. Moore**

Case No. 15-01059-5-SWH

Debtors

Chapter 11

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

| Type of Liability   | Amount            |
|---|-------------------|
| Domestic Support Obligations (from Schedule E)  | 0.00              |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 261,919.02        |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00              |
| Student Loan Obligations (from Schedule F)  | 0.00              |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | 0.00              |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00              |
| <b>TOTAL</b>  | <b>261,919.02</b> |

**State the following:**

|  |           |
|--|-----------|
| Average Income (from Schedule I, Line 12)  | 17,395.47 |
| Average Expenses (from Schedule J, Line 22)  | 18,855.14 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 20,051.73 |

**State the following:**

|  |          |              |
|--|----------|--------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |          | 2,607,889.23 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 7,058.00 |              |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |          | 188,849.02   |
| 4. Total from Schedule F   |          | 1,535,346.68 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |          | 4,332,084.93 |

B6A (Official Form 6A) (12/07)

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH

Debtors

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property                                     | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--|---|------------------------------------|--|-------------------------|
| Residence located at 336 Olde Point Loop, Hampstead, NC 28443            |   | W                                  | 1,000,000.00   | Unknown                 |
| Lot located at 61 Wooten Road, Maple Hill, NC (Value shown is tax value) |   | W                                  | 20,000.00  | 0.00                    |

|             |              |                      |
|-------------|--------------|----------------------|
| Sub-Total > | 1,020,000.00 | (Total of this page) |
|-------------|--------------|----------------------|

|         |              |
|---------|--------------|
| Total > | 1,020,000.00 |
|---------|--------------|

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH**Debtors****SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. Sec. 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Type of Property   | N<br>O<br>N<br>E | Description and Location of Property  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|--|------------------|---|---|---|
| 1. Cash on hand  |                  | Cash  | H   | 3,000.00  |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. |                  | BB&T Checking Acct ending in 4580   | H   | 5,037.48  |
|  |                  | SECU Checking Acct ending in 2278   | W   | 402.38  |
|  |                  | SECU Checking Acct ending in 0207   | W   | 76.83   |
|  |                  | SECU Savings Acct ending in 9795  | W   | 50.31   |
|  |                  | Wells Fargo Bank Checking Account ending in 9387  | H   | 0.00  |
|  |                  | Yadkin Bank Checking Account ending in 0269   | J   | 0.00  |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.  | X                |   |   |   |
| 4. Household goods and furnishings, including audio, video, and computer equipment.  |                  | 4 bedroom sets, sofas, tables, lamps, 4 TVs, sunroom furniture, 3 laptops, personal computer, ipad, Dining room furniture for 8, 4-chair dinette, 2-DVDs, outdoor furniture, washer/dryer | J   | 5,000.00  |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  |                  | Miscellaneous books in home library   | J   | 800.00  |
| 6. Wearing apparel.  |                  | Clothing, footwear  | H   | 1,000.00  |
|  |                  | Clothing, footwear, purses  | W   | 2,000.00  |
| 7. Furs and jewelry.   |                  | Diamond ring, bracelet and earrings   | W   | 2,000.00  |
|  |                  | Diamond ring  | H   | 1,000.00  |
| 8. Firearms and sports, photographic, and other hobby equipment.   | X                |   |   |   |

Sub-Total > 20,367.00  
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Barry A. Moore,  
Doris T. Moore**Case No. **15-01059-5-SWH**

Debtors  
**SCHEDULE B - PERSONAL PROPERTY**  
 (Continuation Sheet)

| Type of Property  | N<br>O<br>N<br>E | Description and Location of Property  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|---|------------------|---|---|---|
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  |                  | Reassure America Life Insurance Co, \$1 million, Term Life Insurance policy no.: VIBLO30670 (wife is beneficiary)                     | H   | 0.00  |
|   |                  | Reassure America Life Insurance Co., \$1 mil. Term Life Policy No.: VIBLO30669 (Insurance trust for 4 older daughters is beneficiary) | H   | 0.00  |
|   |                  | Reassure America Life Insurance, \$1 mil. Term Life Insurance Policy No.: VIBLO30671 (16 year old daughter is the beneficiary)        | H   | 0.00  |
| 10. Annuities. Itemize and name each issuer.  | X                |   |   |   |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |   |   |   |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |   |   |   |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.   |                  | 50% owner in Mental Properties, LLC   | H   | 50,000.00   |
|   |                  | 50% owner in Mental Properties, LLC   | W   | 50,000.00   |
|   |                  | 60% interest in Precision Health Care Services, Inc.  | H   | 0.00  |
|   |                  | 100% interest in CapeSide Addiction Care, PLLC  | H   | 100,000.00  |
|   |                  | 100% interest in CapeSide Psychiatry, PLLC  | H   | 100.00  |
| 14. Interests in partnerships or joint ventures. Itemize.   | X                |   |   |   |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |   |   |   |
| 16. Accounts receivable.  |                  | Loan to Precision Health Care Services, Inc. - not collectible  | H   | 0.00  |

Sub-Total > 200,100.00  
 (Total of this page)

Sheet 1 of 3 continuation sheets attached  
 to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Barry A. Moore,  
Doris T. MooreCase No. 15-01059-5-SWH

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

| Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|---|------------------|--------------------------------------|---|---|
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |   |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |                                      |   |   |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                      |   |   |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |   |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |   |
| 22. Patents, copyrights, and other intellectual property. Give particulars.   | X                |                                      |   |   |
| 23. Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                      |   |   |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |   |   |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.  | X                |                                      |   |   |
| 26. Boats, motors, and accessories.   | X                |                                      |   |   |
| 27. Aircraft and accessories.   | X                |                                      |   |   |

Sub-Total > 0.00  
(Total of this page)

Sheet 2 of 3 continuation sheets attached  
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Barry A. Moore,  
Doris T. MooreCase No. 15-01059-5-SWH

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

| Type of Property   | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|--|------------------|--------------------------------------|---|---|
| 28. Office equipment, furnishings, and supplies.                     | X                |                                      |   |   |
| 29. Machinery, fixtures, equipment, and supplies used in business.   | X                |                                      |   |   |
| 30. Inventory.   | X                |                                      |   |   |
| 31. Animals.   | X                |                                      |   |   |
| 32. Crops - growing or harvested. Give particulars.                  | X                |                                      |   |   |
| 33. Farming equipment and implements.                                | X                |                                      |   |   |
| 34. Farm supplies, chemicals, and feed.                              | X                |                                      |   |   |
| 35. Other personal property of any kind not already listed. Itemize. | X                |                                      |   |   |

|                      |            |
|----------------------|------------|
| Sub-Total >          | 0.00       |
| (Total of this page) |            |
| Total >              | 220,467.00 |

(Report also on Summary of Schedules)

Sheet 3 of 3 continuation sheets attached  
to the Schedule of Personal Property

B6C (Official Form 6C) (4/13)

In re **Barry A. Moore,  
Doris T. Moore**Case No. **15-01059-5-SWH**

Debtors

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

- ☐ 11 U.S.C. §522(b)(2)  
☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

| Description of Property   | Specify Law Providing Each Exemption                               | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|--|----------------------------|---|
| <b><u>Cash on Hand</u></b>  |  |                            |   |
| Cash  | N.C. Gen. Stat. § 1C-1601(a)(2)                                    | 3,000.00                   | 3,000.00  |
| <b><u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u></b>   |  |                            |   |
| BB&T Checking Acct ending in 4580   | N.C. Gen. Stat. § 1C-1601(a)(2)                                    | 5,037.48                   | 5,037.48  |
| SECU Checking Acct ending in 2278   | N.C. Gen. Stat. § 1C-1601(a)(2)                                    | 402.38                     | 402.38  |
| SECU Checking Acct ending in 0207   | N.C. Gen. Stat. § 1C-1601(a)(2)                                    | 76.83                      | 76.83   |
| SECU Savings Acct ending in 9795  | N.C. Gen. Stat. § 1C-1601(a)(2)                                    | 50.31                      | 50.31   |
| <b><u>Household Goods and Furnishings</u></b>   |  |                            |   |
| 4 bedroom sets, sofas, tables, lamps, 4 TVs, sunroom furniture, 3 laptops, personal computer, ipad, Dining room furniture for 8, 4-chair dinette, 2-DVDs, outdoor furniture, washer/dryer | N.C. Gen. Stat. § 1C-1601(a)(4)                                    | 5,000.00                   | 5,000.00  |
| <b><u>Books, Pictures and Other Art Objects; Collectibles</u></b>   |  |                            |   |
| Miscellaneous books in home library   | N.C. Gen. Stat. § 1C-1601(a)(4)                                    | 800.00                     | 800.00  |
| <b><u>Wearing Apparel</u></b>   |  |                            |   |
| Clothing, footwear  | N.C. Gen. Stat. § 1C-1601(a)(4)                                    | 1,000.00                   | 1,000.00  |
| Clothing, footwear, purses  | N.C. Gen. Stat. § 1C-1601(a)(4)                                    | 2,000.00                   | 2,000.00  |
| <b><u>Furs and Jewelry</u></b>  |  |                            |   |
| Diamond ring, bracelet and earrings   | N.C. Gen. Stat. § 1C-1601(a)(4)<br>N.C. Gen. Stat. § 1C-1601(a)(2) | 1,200.00<br>800.00         | 2,000.00  |
| Diamond ring  | N.C. Gen. Stat. § 1C-1601(a)(4)                                    | 1,000.00                   | 1,000.00  |
| <b><u>Interests in Insurance Policies</u></b>   |  |                            |   |
| Reassure America Life Insurance Co, \$1 million, Term Life Insurance policy no.: VIBLO30670 (wife is beneficiary)   | N.C. Const. Art. X § 5; N.C. Gen. Stat. § 1C-1601(a)(6)            | 0.00                       | 0.00  |
| Reassure America Life Insurance Co., \$1 mil. Term Life Policy No.: VIBLO30669 (Insurance trust for 4 older daughters is beneficiary)   | N.C. Const. Art. X § 5; N.C. Gen. Stat. § 1C-1601(a)(6)            | 0.00                       | 0.00  |
| Reassure America Life Insurance, \$1 mil. Term Life Insurance Policy No.: VIBLO30671 (16 year old daughter is the beneficiary)  | N.C. Const. Art. X § 5; N.C. Gen. Stat. § 1C-1601(a)(6)            | 0.00                       | 0.00  |
| <b><u>Stock and Interests in Businesses</u></b>   |  |                            |   |
| 100% interest in CapeSide Addiction Care, PLLC  | N.C. Gen. Stat. § 1C-1601(a)(2)                                    | 533.00                     | 100,000.00  |
| 100% interest in CapeSide Psychiatry, PLLC  | N.C. Gen. Stat. § 1C-1601(a)(2)                                    | 100.00                     | 100.00  |
| <b>Total:</b>   |  | <b>21,000.00</b>           | <b>120,467.00</b>                                     |

0 continuation sheets attached to Schedule of Property Claimed as Exempt



Rev. 12/2009

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON DIVISIONIN THE MATTER OF:  
Barry A. Moore  
Doris T. Moore  
Debtor(s).CASE NUMBER:  
15-01059-5-SWH

## SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, Barry A. Moore and Doris T. Moore, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

| Description of Property and Address | Market Value | Owner (H)Husband (W)Wife (J)Joint | Mortgage Holder or Lien Holder | Amount of Mortgage or Lien | Net Value | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1) |
|-------------------------------------|--------------|-----------------------------------|--------------------------------|----------------------------|-----------|--|
| -NONE-                              |              |                                   |                                |                            |           |  |

Debtor's Age: \_\_\_\_\_

Name of former co-owner: \_\_\_\_\_

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 0.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

| Model, Year Style of Auto | Market Value | Owner (H)Husband (W)Wife (J)Joint | Lien Holder | Amount of Lien | Net Value | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3) |
|---------------------------|--------------|-----------------------------------|-------------|----------------|-----------|--|
| -NONE-                    |              |                                   |             |                |           |  |

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0.00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 1.

| Description of Property   | Market Value | Owner (H)Husband (W)Wife (J)Joint | Lien Holder | Amount of Lien | Net Value | Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4) |
|---|--------------|-----------------------------------|-------------|----------------|-----------|--|
| 4 bedroom sets, sofas, tables, lamps, 4 TVs, sunroom furniture, 3 laptops, personal computer, ipad, Dining room furniture for 8, 4-chair dinette, 2-DVDs, outdoor furniture, washer/dryer | 5,000.00     | J                                 |             |                | 5,000.00  | 5,000.00   |
| Clothing, footwear  | 1,000.00     | H                                 |             |                | 1,000.00  | 1,000.00   |
| Clothing, footwear, purses  | 2,000.00     | W                                 |             |                | 2,000.00  | 2,000.00   |
| Diamond ring  | 1,000.00     | H                                 |             |                | 1,000.00  | 1,000.00   |
| Diamond ring, bracelet and earrings   | 2,000.00     | W                                 |             |                | 2,000.00  | 1,200.00   |
| Miscellaneous books in home library   | 800.00       | J                                 |             |                | 800.00    | 800.00   |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 11,000.00

Schedule C-1 - Property Claimed as Exempt - 12/2009

## 4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

| Description | Market Value | Owner (H)Husband (W)Wife (J)Joint | Lien Holder | Amount of Lien | Net Value | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5) |
|-------------|--------------|-----------------------------------|-------------|----------------|-----------|--|
| -NONE-      |              |                                   |             |                |           |  |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

## 5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

| Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)  | Cash Value |
|---|------------|
| Reassure America Life Insurance Co, \$1 million, Term Life Insurance policy no.: VIBLO30670 (wife is beneficiary)                     | 0.00       |
| Reassure America Life Insurance Co., \$1 mil. Term Life Policy No.: VIBLO30669 (Insurance trust for 4 older daughters is beneficiary) | 0.00       |
| Reassure America Life Insurance, \$1 mil. Term Life Insurance Policy No.: VIBLO30671 (16 year old daughter is the beneficiary)        | 0.00       |

## 6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

| Description |
|-------------|
| -NONE-      |

## 7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

| Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity |
|--|
| -NONE-   |

## 8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

| Description of Property and Address            | Market Value | Owner (H)Husband (W)Wife (J)Joint | Lien Holder | Amount of Lien | Net Value  | Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2) |
|--|--------------|-----------------------------------|-------------|----------------|------------|--|
| 100% interest in CapeSide Psychiatry, PLLC     | 100.00       | H                                 |             |                | 100.00     | 100.00   |
| 100% interest in CapeSide Addiction Care, PLLC | 100,000.00   | H                                 |             |                | 100,000.00 | 533.00   |
| BB&T Checking Acct ending in 4580              | 5,037.48     | H                                 |             |                | 5,037.48   | 5,037.48   |
| Cash   | 3,000.00     | H                                 |             |                | 3,000.00   | 3,000.00   |
| Diamond ring, bracelet and earrings            | 2,000.00     | W                                 |             |                | 2,000.00   | 800.00   |
| SECU Checking Acct ending in 2278              | 402.38       | W                                 |             |                | 402.38     | 402.38   |
| SECU Checking Acct ending in 0207              | 76.83        | W                                 |             |                | 76.83      | 76.83  |
| SECU Savings Acct ending in 9795               | 50.31        | W                                 |             |                | 50.31      | 50.31  |

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 10,000.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

|  |
|--|
| Type of Account\Location of Account\Last Four Digits of Account Number |
|--|

|        |
|--------|
| -NONE- |
|--------|

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

|   |
|---|
| College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary |
|---|

|        |
|--------|
| -NONE- |
|--------|

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

|  |
|--|
| Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number |
|--|

|        |
|--------|
| -NONE- |
|--------|

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

|  |
|--|
| Type of Support\Amount\Location of Funds |
|--|

|        |
|--------|
| -NONE- |
|--------|

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

| Description of Property and Address | Market Value | Lien Holder | Amount of Lien | Net Value |
|-------------------------------------|--------------|-------------|----------------|-----------|
| -NONE-                              |              |             |                |           |

VALUE CLAIMED AS EXEMPT: \$ 0.00

#### 14. NORTH CAROLINA PENSION FUND EXEMPTIONS

|        |  |
|--------|--|
| -NONE- |  |
|--------|--|

#### 15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

|        |  |
|--------|--|
| -NONE- |  |
|--------|--|

#### 16. FEDERAL PENSION FUND EXEMPTIONS

|        |  |
|--------|--|
| -NONE- |  |
|--------|--|

#### 17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

|        |  |
|--------|--|
| -NONE- |  |
|--------|--|

**18. RECENT PURCHASES**

(a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

| Description | Market Value | Lien Holder | Amount of Lien | Net Value |
|-------------|--------------|-------------|----------------|-----------|
| -NONE-      |              |             |                |           |

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

| Description of Replacement Property | Description of Property Liquidated or Converted that May Be Exempt |
|-------------------------------------|--|
|                                     |  |

19. The debtor's property is subject to the following claims:

- Of the United States or its agencies as provided by federal law.
- Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- For payment of obligations contracted for the purchase of specific real property affected.
- For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- For statutory liens, on the specific property affected, other than judicial liens.
- For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- For criminal restitution orders decreed as civil judgments pursuant to G.S. 15A-1340.38.
- Debts of a kind specified in 11 U.S.C. § 623(a)(1) (certain taxes), (5) (domestic support obligations).
- Debts of a kind specified in 11 U.S.C. § 622(c).

| Claimant     | Nature of Claim          | Amount of Claim | Description of Property                              | Value of Property | Net Value |
|--------------|--------------------------|-----------------|--|-------------------|-----------|
| Corey Lawaon | lien on stock in company | 240,000.00      | 60% Interest in Precision Health Care Services, Inc. | 0.00              | 0.00      |
| BB&T         | First D/T                | 1,470,000.00    | Residence located at 338                             |                   |           |
| BB&T         | 2nd lien                 | 289,000.00      | Olde Point Loop,                                     |                   |           |
| BB&T         | 3rd lien                 | Unknown         | Hampstead, NC 28443                                  | 1,000,000.00      | Unknown   |

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

**UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT**We, Barry A. Moore and Doris T. Moore, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.Executed on: March 18, 2015Barry A. Moore

Debtor

Doris T. Moore

Joint Debtor

B6D (Official Form 6D) (12/07)

In re **Barry A. Moore,  
Doris T. Moore**Case No. **15-01059-5-SWH**

## Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | Husband, Wife, Joint, or Community |                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|--------------------------------------|------------------------------------|------------------|--|--|--------------------------------------|--|---------------------------------|
|  |                                      | H<br>U<br>S<br>B<br>A<br>N<br>D    | W<br>I<br>F<br>E |  |  |                                      |  |                                 |
| Account No. xxxxxx9867   |                                      |                                    |                  |  |  |                                      |  |                                 |
| Creditor #: 1<br>BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847                             |                                      | J                                  |                  |  |  |                                      |  |                                 |
|  |                                      |                                    |                  |  |  |                                      | 1,470,000.00   | 470,000.00                      |
|  |                                      |                                    |                  |  |  |                                      |  |                                 |
| Account No.  |                                      |                                    |                  |  |  |                                      |  |                                 |
| Creditor #: 2<br>BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847                             |                                      | J                                  |                  |  |  |                                      |  |                                 |
|  |                                      |                                    |                  |  |  |                                      | 299,000.00   | 299,000.00                      |
|  |                                      |                                    |                  |  |  |                                      |  |                                 |
| Account No.  |                                      |                                    |                  |  |  |                                      |  |                                 |
| Creditor #: 3<br>BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847                             |                                      | J                                  |                  |  |  |                                      |  |                                 |
|  |                                      |                                    |                  |  |  |                                      | Unknown  | Unknown                         |
|  |                                      |                                    |                  |  |  |                                      |  |                                 |
| Account No.  |                                      |                                    |                  |  |  |                                      |  |                                 |
| Creditor #: 4<br>Raymond A. D'Angelo<br>c/o Coastal Care<br>165 Center Street<br>Jacksonville, NC 28540          | X                                    | J                                  |                  |  |  |                                      |  |                                 |
|  |                                      |                                    |                  |  |  |                                      | 7,099.00   | 7,099.00                        |
|  |                                      |                                    |                  |  |  |                                      |  |                                 |
| Subtotal<br>(Total of this page)   |                                      |                                    |                  |  |  |                                      | 1,776,099.00   | 776,099.00                      |

2 continuation sheets attached

B6D (Official Form 6D) (12/07) - Cont.

In re Barry A. Moore,  
Doris T. Moore

Case No. 15-01059-5-SWH

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions.)                              | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community |  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|---|--------------------------------------|------------------------------------|--|--|--|--------------------------------------|--|---------------------------------|
|   |                                      | H<br>W<br>J<br>C                   | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND VALUE<br>OF PROPERTY<br>SUBJECT TO LIEN |  |  |                                      |  |                                 |
| Account No.   |                                      |                                    | 4/8/2013   |  |  |                                      |  |                                 |
| Creditor #: 5<br>Internal Revenue Service<br>Alamance Bldg Mail Stop 9<br>4905 Koger Blvd Ste 102<br>Greensboro, NC 27407               |                                      | J                                  | Tax lien<br><br>13 M 0061  |  |  |                                      |  |                                 |
|   |                                      |                                    | Value \$ 0.00  |  |  |                                      | 296,121.16   | 296,121.16                      |
| Account No.   |                                      |                                    | 12/31/2013   |  |  |                                      |  |                                 |
| Creditor #: 6<br>Internal Revenue Service<br>Alamance Bldg Mail Stop 9<br>4905 Koger Blvd Ste 102<br>Greensboro, NC 27407               |                                      | J                                  | Tax lien<br><br>13 M 0271  |  |  |                                      |  |                                 |
|   |                                      |                                    | Value \$ 0.00  |  |  |                                      | 153,720.00   | 153,720.00                      |
| Account No.   |                                      |                                    | 9/23/2014  |  |  |                                      |  |                                 |
| Creditor #: 7<br>Internal Revenue Service<br>Alamance Bldg, Mail Stop 9<br>4905 Koger Blvd Ste 102<br>Greensboro, NC 27407              |                                      | H                                  | Tax Lien<br><br>14 M 0189  |  |  |                                      |  |                                 |
|   |                                      |                                    | Value \$ 0.00  |  |  |                                      | 169,901.77   | 169,901.77                      |
| Account No.   |                                      |                                    | lien on stock in company   |  |  |                                      |  |                                 |
| Creditor #: 8<br>Corey Lawson<br>P.O. Box 116<br>La Grange, NC 28551  |                                      | J                                  | 60% interest in Precision Health Care<br>Services, Inc. (60 shares)  |  |  |                                      |  |                                 |
|   |                                      |                                    | Value \$ 0.00  |  |  |                                      | 240,000.00   | 240,000.00                      |
| Account No.   |                                      |                                    | 7/22/2014  |  |  |                                      |  |                                 |
| Creditor #: 9<br>N.C. Dept. of Revenue<br>ATTN: Officer<br>Office Svcs Div, Bankruptcy Unit<br>P. O. Box 1168<br>Raleigh, NC 27602-1168 |                                      | J                                  | Tax Lien<br><br>14 M 0155  |  |  |                                      |  |                                 |
|   |                                      |                                    | Value \$ 0.00  |  |  |                                      | 63,351.17  | 63,351.17                       |
| Subtotal<br>(Total of this page)  |                                      |                                    |  |  |  |                                      | 923,094.10   | 923,094.10                      |

Sheet 1 of 2 continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions.)                | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND VALUE<br>OF PROPERTY<br>SUBJECT TO LIEN | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|---|--------------------------------------|------------------|--|--|--|--------------------------------------|--|---------------------------------|
|   |                                      |                  |  |  |  |                                      |  |                                 |
| Account No.   |                                      |                  | 12/20/2013   |  |  |                                      |  |                                 |
| Creditor #: 10<br>WM Cap.Partners XXXVIII, LLC<br>Attn: Manager or Agent<br>500 Fifth Ave, Ste 2440<br>New York, NY 10110 |                                      | X J              | Judgment   |  |  |                                      |  |                                 |
|   |                                      |                  | Value \$ 0.00  |  |  |                                      | 908,696.13   | 908,696.13                      |
| Account No.   |                                      |                  |  |  |  |                                      |  |                                 |
| Jim Barr Coleman<br>P.O. Box 12904<br>Wilmington, NC 28405  |                                      |                  | Representing:<br>WM Cap.Partners XXXVIII, LLC  |  |  |                                      | Notice Only  |                                 |
|   |                                      |                  | Value \$   |  |  |                                      |  |                                 |
| Account No.   |                                      |                  |  |  |  |                                      |  |                                 |
| David Ray<br>Atty for WM Capital Ptners<br>131 Racine Dr., Ste 201<br>Wilmington, NC 28403-8752                           |                                      |                  | Representing:<br>WM Cap.Partners XXXVIII, LLC  |  |  |                                      | Notice Only  |                                 |
|   |                                      |                  | Value \$   |  |  |                                      |  |                                 |
| Account No.   |                                      |                  |  |  |  |                                      |  |                                 |
|   |                                      |                  |  |  |  |                                      |  |                                 |
|   |                                      |                  | Value \$   |  |  |                                      |  |                                 |
| Account No.   |                                      |                  |  |  |  |                                      |  |                                 |
|   |                                      |                  |  |  |  |                                      |  |                                 |
|   |                                      |                  | Value \$   |  |  |                                      |  |                                 |
| Subtotal<br>(Total of this page)  |                                      |                  |  |  |  |                                      | 908,696.13   | 908,696.13                      |
| Total<br>(Report on Summary of Schedules)   |                                      |                  |  |  |  |                                      | 3,607,889.23   | 2,607,889.23                    |

Sheet 2 of 2 continuation sheets attached to  
Schedule of Creditors Holding Secured Claims



B6E (Official Form 6E) (4/13)

In re **Barry A. Moore,  
Doris T. Moore**Case No. **15-01059-5-SWH****Debtors****SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



B6E (Official Form 6E) (4/13) - Cont.

In re **Barry A. Moore,  
Doris T. Moore**Case No. **15-01059-5-SWH**

Debtors

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)Taxes and Certain Other Debts  
Owed to Governmental Units

## TYPE OF PRIORITY

| CREDITOR'S NAME,<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions.)                              | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community<br><br>DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR CLAIM | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT<br>OF CLAIM | AMOUNT NOT<br>ENTITLED TO<br>PRIORITY, IF ANY |
|--|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
|  |                                      |                  |  |  |  |                                      |                    | AMOUNT<br>ENTITLED TO<br>PRIORITY             |
| Account No.<br>Creditor #: 1<br>Internal Revenue Service<br>Alamance Bldg Mail Stop 9<br>4905 Koger Blvd Ste 102<br>Greensboro, NC 27407 |                                      | J                |  |  |  |                                      | Unknown            | Unknown                                       |
| Account No.<br>Creditor #: 2<br>Internal Revenue Service<br>Alamance Bldg Mail Stop 9<br>4905 Koger Blvd Ste 102<br>Greensboro, NC 27407 |                                      | H                | Taxes owed by ACTMedical Group, PA and<br>ACT Health Management Services, LLC                    |  |  |                                      | 188,849.02         | 0.00  |
| Account No.<br>Creditor #: 3<br>Lenoir County Tax<br>Attn: Manager or Agent<br>PO Drawer 3289<br>Kinston, NC 28502                       |                                      | H                | Taxes owed by Precision Health Care<br>Services, Inc.  |  |  |                                      | Unknown            | 0.00  |
| Account No.<br>Creditor #: 4<br>N.C. Dept. of Commerce<br>Attn: Manager or Agent<br>P.O. Box 16504<br>Raleigh, NC 27611                  |                                      | J                |  |  |  |                                      | Unknown            | Unknown                                       |
| Account No.<br>Sharon A. Johnston<br>Legal Services Section<br>Div. of Employ. Security<br>P.O. Box 25903<br>Raleigh, NC 27611           |                                      |                  | Representing:<br>N.C. Dept. of Commerce  |  |  |                                      | Notice Only        |   |
| Subtotal<br>(Total of this page)   |                                      |                  |  |  |  |                                      | 188,849.02         | 0.00  |

Sheet 1 of 2 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Barry A. Moore,  
Doris T. Moore

Case No. 15-01059-5-SWH

Debtors

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)Taxes and Certain Other Debts  
Owed to Governmental Units

TYPE OF PRIORITY

| CREDITOR'S NAME,<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions.)  | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community<br><br>DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR CLAIM         | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT<br>OF CLAIM | AMOUNT NOT<br>ENTITLED TO<br>PRIORITY, IF ANY |
|--|--------------------------------------|------------------|--|--|--|--------------------------------------|--------------------|---|
|  |                                      |                  |  |  |  |                                      |                    | AMOUNT<br>ENTITLED TO<br>PRIORITY             |
| Account No.<br>Creditor #: 5<br>N.C. Dept. of Revenue<br>ATTN: Officer<br>Office Svcs Div, Bankruptcy Unit<br>P. O. Box 1168<br>Raleigh, NC 27602-1168 |                                      | J                | Personal obligation of taxes owed by ACT<br>Medical Group, PA and ACT Health<br>Management Services< LLC |  |  |                                      | 66,012.00          | Unknown<br><br>Unknown                        |
| Account No.<br>Creditor #: 6<br>New Hanover Co. Tax Collector<br>Attn: Manager or Agent<br>P.O. Box 18000<br>Wilmington, NC 28406                      |                                      | H                | Taxes owed by corporate entities   |  |  |                                      | Unknown            | Unknown<br><br>0.00                           |
| Account No.<br>Creditor #: 7<br>Pender Co. Tax Collector<br>Attn: Manager or Agent<br>P.O. Box 366<br>Burgaw, NC 28425                                 |                                      | J                | Ad valorem taxes on 61 Wooten Road,<br>Maple Hill, NC  |  |  |                                      | 157.78             | 0.00<br><br>157.78                            |
| Account No.<br>Creditor #: 8<br>Pender Co. Tax Collector<br>Attn: Manager or Agent<br>P.O. Box 366<br>Burgaw, NC 28425                                 |                                      | J                | 2014 ad valorem taxes due on 336 Olde<br>Point Loop, Hampstead, NC                                       |  |  |                                      | 6,900.22           | 0.00<br><br>6,900.22                          |
| Account No.  |                                      |                  |  |  |  |                                      |                    |   |

Sheet 2 of 2 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority ClaimsSubtotal  
(Total of this page)

73,070.00

0.00  
7,058.00Total  
(Report on Summary of Schedules)

261,919.02

188,849.02  
7,058.00

B6F (Official Form 6F) (12/07)

In re **Barry A. Moore,  
Doris T. Moore**Case No. **15-01059-5-SWH****Debtors****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                       | C<br>O<br>D<br>E<br>D<br>E<br>B<br>T<br>O<br>R | Husband, Wife, Joint, or Community |   | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|---|--|------------------------------------|---|--|--|--------------------------------------|-----------------|
|   |  | H                                  | W |  |  |                                      |                 |
| Account No. xxxx-xxxx-xxxx-9703<br>Creditor #: 1<br>AT&T Universal Card<br>Attn: Manager or Agent<br>One AT&T Way, Rm 3A104<br>Bedminster, NJ 07921 |  |                                    | W |  |  |                                      | 10,500.00       |
| Account No. xxxx-xxxx-xxxx-0652<br>Creditor #: 2<br>Bank of America<br>Attn: Mgr, Agt or Officer<br>P.O. Box 15019<br>Wilmington, DE                |  | H                                  |   |  |  |                                      | 11,291.35       |
| Account No. 6621<br>Creditor #: 3<br>BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847  |  | H                                  |   |  |  |                                      | 1,441.59        |
| Account No. 2967<br>Creditor #: 4<br>BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847  |  | H                                  |   |  |  |                                      | 23,090.35       |
| Subtotal<br>(Total of this page)  |  |                                    |   |  |  |                                      | 46,323.29       |

7 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                       | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community |   | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                  |
|---|--------------------------------------|------------------------------------|---|--|--|--------------------------------------|----------------------------------|
|   |                                      | H<br>W<br>J<br>C                   | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |  |  |                                      |                                  |
| Account No. xxxx-xxxx-xxxx-4675<br>Creditor #: 5<br>BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847             |                                      | W                                  |   |  |  |                                      | 10,091.65                        |
| Account No. xxxxxxxxxx2069<br>Creditor #: 6<br>BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847                  |                                      | W                                  |   |  |  |                                      | 2,453.05                         |
| Account No. xxxxxxxxxxxx6767<br>Creditor #: 7<br>Exxonmobile<br>c/o CitiBank<br>PO Box 688940<br>Des Moines, IA 50368               |                                      | W                                  |   |  |  |                                      | 1,163.85                         |
| Account No. xxxx-xxxx-xxxx-3081<br>Creditor #: 8<br>Gap Visa/GERB<br>Attn: Manager or Agent<br>P.O. Box 960017<br>Orlando, FL 32896 |                                      | W                                  |   |  |  |                                      | 3,435.99                         |
| Account No.<br>Creditor #: 9<br>IASIS<br>Attn: Manager or Agent<br>6500 Creedmoor Rd, #112<br>Raleigh, NC 27613                     |                                      | H                                  | Personal guaranty of corporate debt   |  |  |                                      | Unknown                          |
| Sheet no. <u>1</u> of <u>7</u> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                     |                                      |                                    |   |  |  |                                      | Subtotal<br>(Total of this page) |
|   |                                      |                                    |   |  |  |                                      | 17,144.54                        |

B6F (Official Form 6F) (12/07) - Cont.

In re Barry A. Moore,  
Doris T. MooreCase No. 15-01059-5-SWH

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community |  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                  |
|--|--------------------------------------|------------------------------------|--|--|--|--------------------------------------|----------------------------------|
|  |                                      | H<br>W<br>J<br>C                   | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE.                        |  |  |                                      |                                  |
| Account No. xxx-xxxxxx0-001<br>Creditor #: 10<br>Mack Financial Services<br>Attn: Manager or Agent<br>P.O. Box 26131<br>Greensboro, NC 27402 |                                      | J                                  | Deficiency on RV - 2002 Prevost XLV2 and 2004 Land Rover   |  |  |                                      | 85,862.09                        |
| Account No.<br>Mack Financial Svc.<br>c/o Citi Bank<br>P.O. Box 7247-0236<br>Philadelphia, PA 19170  |                                      |                                    | Representing:<br>Mack Financial Services   |  |  |                                      | Notice Only                      |
| Account No. xx-xxx-xxx-5700<br>Creditor #: 11<br>Macy's Visa<br>c/o Department Stores Ntl Bk<br>P.O. Box 8053<br>Mason, OH 45040             |                                      | W                                  |  |  |  |                                      | 2,970.72                         |
| Account No.<br>Creditor #: 12<br>Mental Properties, LLC<br>Attn: Manager or Agent<br>336 Olde Point Loop<br>Hampstead, NC 28443              |                                      | J                                  | Pledged collateral to Stubbs & Perdue, P.A. as security for payment of legal fees due during the Chapter 11 of the debtors |  |  |                                      | Unknown                          |
| Account No. xxxxxx4098<br>Creditor #: 13<br>Mercedes Benz Financial<br>ATTN: Manager or Agent<br>P. O. Box 961<br>Roanoke, TX 76262-0961     |                                      | H                                  | Defaulted on lease; vehicle returned   |  |  |                                      | 17,878.14                        |
| Sheet no. <u>2</u> of <u>7</u> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                              |                                      |                                    |  |  |  |                                      | Subtotal<br>(Total of this page) |
|  |                                      |                                    |  |  |  |                                      | 106,710.95                       |

B6F (Official Form 6F) (12/07) - Cont.

In re Barry A. Moore,  
Doris T. MooreCase No. 15-01059-5-SWH

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                      | C<br>O<br>D<br>E<br>B<br>O<br>R | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                  |
|--|---------------------------------|------------------------------------|---|--|--|--------------------------------------|----------------------------------|
|  |                                 | H<br>W<br>J<br>C                   |   |  |  |                                      |                                  |
| Account No.<br>Creditor #: 14<br>Phyllis Moore<br>6800 S. Granite Ave.<br>Villa 123<br>Tulsa, OK 74136   |                                 | H                                  |   |  |  |                                      | 50,000.00                        |
| Account No.<br>Creditor #: 15<br>Phyllis Moore<br>6800 S. Granite Ave.<br>Villa 123<br>Tulsa, OK 74136   |                                 | J                                  | loan  |  |  |                                      | Unknown                          |
| Account No.<br>Creditor #: 16<br>Newbridge Bank<br>Attn: Managing Agent<br>PO Box 867<br>Lexington, NC 27293-0867                                  | X                               | H                                  |   | X  | X  |                                      | 29,856.23                        |
| Account No.<br>Creditor #: 17<br>NextGen Healthcare Info.Sys.<br>c/o Hemar, Rousso & Heald<br>15910 Ventura Blvd, 12th Fl<br>Encino, CA 91436-2829 |                                 | H                                  | Personal guaranty of corporate debt   |  |  |                                      | 389,124.69                       |
| Account No.<br>Creditor #: 18<br>O.R.B.I.T. Owners Assoc., Inc.<br>Attn: Manager or Agent<br>P.O. Box 863596<br>Orlando, FL 32886-3596             |                                 | J                                  | Maintenance fees associated with Orlando<br>timeshare   |  |  |                                      | 819.08                           |
| Sheet no. <u>3</u> of <u>7</u> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                                    |                                 |                                    |   |  |  |                                      | Subtotal<br>(Total of this page) |
|  |                                 |                                    |   |  |  |                                      | 469,800.00                       |

B6F (Official Form 6F) (12/07) - Cont.

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                       | C<br>O<br>D<br>E<br>D<br>E<br>B<br>I<br>T<br>O<br>R | Husband, Wife, Joint, or Community |   | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|---|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
|   |   | H                                  | W |  |  |                                      |                 |
| Account No. xxxx2327<br>Creditor #: 19<br>Paragon Revenue Group<br>Attn: Managing Agent<br>P. O. Box 127<br>Concord, NC 28026       |   |                                    | J |  |  |                                      | 1,008.89        |
| Account No. xxx5415<br>Creditor #: 20<br>Pinnacle Recovery, Inc.<br>Attn: Manager or Agent<br>P.O. Box 130848<br>Carlsbad, CA 92013 |   |                                    | J |  |  |                                      | Unknown         |
| Account No.<br>Wyndham Vacation Resorts<br>Attn: Manager or Agent<br>P.O. Box 3630<br>Boston, MA 02241                              |   |                                    |   |  |  |                                      | Notice Only     |
| Account No.<br>Creditor #: 21<br>PNC Bank<br>Attn: J.Caleb Thomas<br>P.O. Box 389<br>Raleigh, NC 27602                              | X   | H                                  |   | X  |  |                                      | 142,521.07      |
| Account No.<br>J. Caleb Thomas<br>Parker Poe<br>PO Box 389<br>Raleigh, NC 27602   |   |                                    |   |  |  |                                      | Notice Only     |

Sheet no. 4 of 7 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **143,529.96**

B6F (Official Form 6F) (12/07) - Cont.

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                         | C<br>O<br>D<br>E<br>D<br>E<br>B<br>I<br>T<br>O<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community<br><br>DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                  |
|---|---|------------------|---|--|--|--------------------------------------|----------------------------------|
|   |   |                  |   |  |  |                                      |                                  |
| Account No.<br>Creditor #: 22<br>PNC Bank<br>Attn: Mgr, Agent or Officer<br>P.O. Box 389<br>Raleigh, NC 27602                         | X   | H                | Credit cards in the name of ACT Medical Group   |  |  |                                      | 24,000.00                        |
| Account No. xxxxxxxxxxxx3568<br>Creditor #: 23<br>Talbot's<br>c/o Quantum3 Group LLC<br>P.O. Box 788<br>Kirkland, WA 98083-0788       |   | W                |   |  |  |                                      | 596.00                           |
| Account No.<br>Creditor #: 24<br>Bill Thompson<br>124 E Mississippi Beach<br>Beach Haven, NJ 08008                                    |   | J                | loan  |  |  |                                      | 17,000.00                        |
| Account No.<br>Creditor #: 25<br>Marie Tindal<br>1279 Blue Creek Rd.<br>Jacksonville, NC 28540  |   | J                | loan  |  |  |                                      | 25,000.00                        |
| Account No. xxxxxxxxxxxx2672<br>Creditor #: 26<br>USAA<br>Attn: Manager or Agent<br>10750 McDermott Fwy<br>San Antonio, TX 78288-0750 |   | H                |   |  |  |                                      | 25,247.81                        |
| Sheet no. <u>5</u> of <u>7</u> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                       |   |                  |   |  |  |                                      | Subtotal<br>(Total of this page) |
|   |   |                  |   |  |  |                                      | 91,843.81                        |



B6F (Official Form 6F) (12/07) - Cont.

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | C<br>O<br>D<br>E<br>D<br>E<br>B<br>I<br>T<br>O<br>R | Husband, Wife, Joint, or Community |   | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|--|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
|  |   | H<br>W<br>J<br>C                   |   |  |  |                                      |                 |
| Account No. x-xxxx-2938<br>Creditor #: 27<br>Victoria's Secret<br>Attn: Manager or Agent<br>P.O. Box 659728<br>San Antonio, TX 78265   |   |                                    | W |  |  |                                      | 1,723.07        |
| Account No. xxxxxxxxx5700<br>Creditor #: 28<br>Wells Fargo Equipment Finance<br>Attn: Manager or Agent<br>P.O. Box 1450<br>Minneapolis, MN 55485   | X   |                                    | H |  |  |                                      | 23,717.49       |
| Account No.<br>Creditor #: 29<br>Western Equipment Finance<br>Attn: Manager or Agent<br>P.O. Box 640<br>Devils Lake, ND 58301  |   |                                    | H |  |  |                                      | 24,664.65       |
| Account No.<br>Creditor #: 30<br>Xerox Corporation<br>Attn: Manager or Agent<br>PO Box 827598<br>Philadelphia, PA 19182  |   |                                    | H |  |  |                                      | 19,024.00       |
| Account No.<br>Creditor #: 31<br>Yadkin Bank<br>Attn: Mgr or Agent<br>206 High House Road<br>Cary, NC 27513  | X   |                                    | H | X  |  |                                      | 590,864.92      |
| <div style="display: flex; justify-content: space-between;"> <span>Sheet no. <u>6</u> of <u>7</u> sheets attached to Schedule of<br/>Creditors Holding Unsecured Nonpriority Claims</span> <span>Subtotal<br/>(Total of this page)</span> </div> |   |                                    |   |  |  |                                      | 659,994.13      |

B6F (Official Form 6F) (12/07) - Cont.

In re Barry A. Moore,  
Doris T. MooreCase No. 15-01059-5-SWH

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>D<br>E<br>B<br>I<br>T<br>O<br>R | Husband, Wife, Joint, or Community |   | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|---|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
|   |   | H<br>W<br>J<br>C                   | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |  |  |                                      |                 |
| Account No.   |   |                                    |   |  |  |                                      | Notice Only     |
| James S. Livermon<br>Atty. for Yadkin Bank<br>P.O. Box 353<br>Rocky Mount, NC 27802                           |   |                                    | Representing:<br>Yadkin Bank  |  |  |                                      |                 |
| Account No.   |   |                                    |   |  |  |                                      |                 |
|   |   |                                    |   |  |  |                                      |                 |
| Account No.   |   |                                    |   |  |  |                                      |                 |
|   |   |                                    |   |  |  |                                      |                 |
| Account No.   |   |                                    |   |  |  |                                      |                 |
|   |   |                                    |   |  |  |                                      |                 |
| Account No.   |   |                                    |   |  |  |                                      |                 |
|   |   |                                    |   |  |  |                                      |                 |

Sheet no. 7 of 7 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page)

0.00

Total  
 (Report on Summary of Schedules)

1,535,346.68

B6G (Official Form 6G) (12/07)

In re **Barry A. Moore,  
Doris T. Moore**Case No. 15-01059-5-SWH**Debtors****SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

| Name and Mailing Address, Including Zip Code,<br>of Other Parties to Lease or Contract | Description of Contract or Lease and Nature of Debtor's Interest.<br>State whether lease is for nonresidential real property.<br>State contract number of any government contract. |
|--|--|
| O.R.B.I.T<br>Attn: Manager or Agent<br>P.O. Box 863596<br>Orlando, FL 32886            | Timeshare interest for Week 43 at Orbit 1 Resort,<br>Orlando, Florida  |

B6H (Official Form 6H) (12/07)

In re **Barry A. Moore,  
Doris T. Moore**Case No. **15-01059-5-SWH**

## Debtors

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR  | NAME AND ADDRESS OF CREDITOR  |
|---|---|
| ACT Medical Group, P.A.<br>Attn: Manager or Agent<br>311-4E Judges Road<br>Wilmington, NC 28405       | WM Cap.Partners XXXVIII, LLC<br>Attn: Manager or Agent<br>500 Fifth Ave, Ste 2440<br>New York, NY 10110 |
| ACT Medical Group, P.A.<br>Attn: Manager or Agent<br>311-4E Judges Road<br>Wilmington, NC 28405       | PNC Bank<br>Attn: J.Caleb Thomas<br>P.O. Box 389<br>Raleigh, NC 27602                                   |
| ACT Medical Group, P.A.<br>Attn: Manager or Agent<br>311-4E Judges Road<br>Wilmington, NC 28405       | Wells Fargo Equipment Finance<br>Attn: Manager or Agent<br>P.O. Box 1450<br>Minneapolis, MN 55485       |
| ACT Medical Group, P.A.<br>Attn: Manager or Agent<br>311-4E Judges Road<br>Wilmington, NC 28405       | PNC Bank<br>Attn: Mgr, Agent or Officer<br>P.O. Box 389<br>Raleigh, NC 27602                            |
| Capeside Addiction Care, PLLC<br>Attn: Manager or Agent<br>311-4E Judges Road<br>Wilmington, NC 28405 | Yadkin Bank<br>Attn: Mgr or Agent<br>206 High House Road<br>Cary, NC 27513                              |
| CapeSide Psychiatry, PLLC<br>Attn: Mgr or Agent<br>311-4E Judges Road<br>Wilmington, NC 28405         | Yadkin Bank<br>Attn: Mgr or Agent<br>206 High House Road<br>Cary, NC 27513                              |
| Mental Properties, LLC<br>c/o Manager or Agent<br>336 Olde Point Loop<br>Hampstead, NC 28443          | Yadkin Bank<br>Attn: Mgr or Agent<br>206 High House Road<br>Cary, NC 27513                              |
| Mental Properties, LLC<br>c/o Manager or Agent<br>336 Olde Point Loop<br>Hampstead, NC 28443          | Newbridge Bank<br>Attn: Managing Agent<br>PO Box 867<br>Lexington, NC 27293-0867                        |
| Precision Health Care Svc, Inc.<br>311-4E Judges Road<br>Wilmington, NC 28405                         | PNC Bank<br>Attn: J.Caleb Thomas<br>P.O. Box 389<br>Raleigh, NC 27602                                   |

In re     Barry A. Moore,  
           Doris T. Moore

Case No. 15-01059-5-SWH

Debtors

**SCHEDULE H - CODEBTORS**  
(Continuation Sheet)

---

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

---

Precision Health Care Svc, Inc.  
311-4E Judges Road  
Wilmington, NC 28405

Raymond A. D'Angelo  
c/o Coastal Care  
165 Center Street  
Jacksonville, NC 28540

Fill in this information to identify your case:

|   |   |
|---|---|
| Debtor 1                                | <u>Barry A. Moore</u>   |
| Debtor 2<br>(Spouse, if filing)         | <u>Doris T. Moore</u>   |
| United States Bankruptcy Court for the: | <u>EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON DIVISION</u> |
| Case number<br>(If known)               | <u>15-01059-5-SWH</u>   |

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form B 61

## Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Employment

| 1. Fill in your employment information.  |                          | Debtor 1  | Debtor 2 or non-filing spouse   |
|--|--------------------------|---|---|
| If you have more than one job, attach a separate page with information about additional employers. | Employment status        | <input checked="" type="checkbox"/> Employed<br><input type="checkbox"/> Not employed | <input checked="" type="checkbox"/> Employed<br><input type="checkbox"/> Not employed |
|  | Occupation               | <u>Psychiatrist</u>   | <u>Medical Assistant</u>  |
| Include part-time, seasonal, or self-employed work.  | Employer's name          | <u>CapeSide Addiction Care, PLLC</u>  | <u>CapeSide Addiction Care</u>  |
|  | Employer's address       | <u>311-4E Judges Road<br/>Wilmington, NC 28405</u>                                    | <u>311-4E Judges Road<br/>Wilmington, NC 28405</u>                                    |
| Occupation may include student or homemaker, if it applies.  | How long employed there? | <u>2014</u>   | <u>2014</u>   |

## Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|  | For Debtor 1        | For Debtor 2 or non-filing spouse |
|--|---------------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | \$ <u>14,052.50</u> | \$ <u>2,528.13</u>                |
| 3. Estimate and list monthly overtime pay.   | +\$ <u>0.00</u>     | +\$ <u>0.00</u>                   |
| 4. Calculate gross income. Add line 2 + line 3.  | \$ <u>14,052.50</u> | \$ <u>2,528.13</u>                |

Debtor 1 **Barry A. Moore**  
 Debtor 2 **Doris T. Moore**

Case number (if known) **15-01059-5-SWH**

|  | For Debtor 1                     | For Debtor 2 or non-filing spouse |
|--|----------------------------------|-----------------------------------|
| Copy line 4 here   | 4. \$ 14,052.50                  | \$ 2,528.13                       |
| <b>5. List all payroll deductions:</b>   |                                  |                                   |
| 5a. Tax, Medicare, and Social Security deductions  | 5a. \$ 4,876.16                  | \$ 0.00                           |
| 5b. Mandatory contributions for retirement plans   | 5b. \$ 0.00                      | \$ 0.00                           |
| 5c. Voluntary contributions for retirement plans   | 5c. \$ 0.00                      | \$ 0.00                           |
| 5d. Required repayments of retirement fund loans   | 5d. \$ 0.00                      | \$ 0.00                           |
| 5e. Insurance  | 5e. \$ 0.00                      | \$ 0.00                           |
| 5f. Domestic support obligations   | 5f. \$ 0.00                      | \$ 0.00                           |
| 5g. Union dues   | 5g. \$ 0.00                      | \$ 0.00                           |
| 5h. Other deductions. Specify:   | 5h. \$ 0.00                      | \$ 0.00                           |
| <b>6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.</b>   | 6. \$ 4,876.16                   | \$ 0.00                           |
| <b>7. Calculate total monthly take-home pay. Subtract line 6 from line 4.</b>  | 7. \$ 9,176.34                   | \$ 2,528.13                       |
| <b>8. List all other income regularly received:</b>  |                                  |                                   |
| 8a. Net income from rental property and from operating a business, profession, or farm<br>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a. \$ 0.00                      | \$ 0.00                           |
| 8b. Interest and dividends   | 8b. \$ 0.00                      | \$ 0.00                           |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive<br>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c. \$ 0.00                      | \$ 0.00                           |
| 8d. Unemployment compensation  | 8d. \$ 0.00                      | \$ 0.00                           |
| 8e. Social Security  | 8e. \$ 3,116.00                  | \$ 0.00                           |
| 8f. Other government assistance that you regularly receive<br>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.<br>Specify: <u>Social Security for 16 year old daughter</u>   | 8f. \$ 1,271.00                  | \$ 0.00                           |
| 8g. Pension or retirement income   | 8g. \$ 0.00                      | \$ 1,304.00                       |
| 8h. Other monthly income. Specify:   | 8h. \$ 0.00                      | \$ 0.00                           |
| <b>9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.</b>   | 9. \$ 4,387.00                   | \$ 1,304.00                       |
| <b>10. Calculate monthly income. Add line 7 + line 9.</b><br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10. \$ 13,563.34 + \$ 3,832.13 = | \$ 17,395.47                      |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b><br>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.<br>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.<br>Specify: | 11. +\$                          | 0.00                              |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.</b><br>Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies  | 12. \$                           | 17,395.47                         |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b>   |                                  |                                   |
| <input checked="" type="checkbox"/> No.  |                                  |                                   |
| <input type="checkbox"/> Yes. Explain: <u>Debtors do not expect an increase in income within the next year.</u>  |                                  |                                   |

Fill in this information to identify your case:

Debtor 1 Barry A. Moore

Debtor 2 Doris T. Moore  
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON DIVISION

Case number 15-01059-5-SWH  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form B 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

16

☐ No

☒ Yes

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 7,229.40

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00



Debtor 1 Barry A. Moore  
 Debtor 2 Doris T. Moore

Case number (if known) 15-01059-5-SWH

|  |          |           |
|--|----------|-----------|
| <b>6. Utilities:</b>   |          |           |
| 6a. Electricity, heat, natural gas   | 6a. \$   | 1,200.00  |
| 6b. Water, sewer, garbage collection   | 6b. \$   | 110.00    |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c. \$   | 610.00    |
| 6d. Other. Specify: _____  | 6d. \$   | 0.00      |
| <b>7. Food and housekeeping supplies</b>   | 7. \$    | 1,000.00  |
| <b>8. Childcare and children's education costs</b>   | 8. \$    | 5,144.00  |
| <b>9. Clothing, laundry, and dry cleaning</b>  | 9. \$    | 450.00    |
| <b>10. Personal care products and services</b>   | 10. \$   | 400.00    |
| <b>11. Medical and dental expenses</b>   | 11. \$   | 500.00    |
| <b>12. Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12. \$   | 578.00    |
| <b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>  | 13. \$   | 0.00      |
| <b>14. Charitable contributions and religious donations</b>  | 14. \$   | 0.00      |
| <b>15. Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |          |           |
| 15a. Life insurance  | 15a. \$  | 1,423.74  |
| 15b. Health insurance  | 15b. \$  | 0.00      |
| 15c. Vehicle insurance   | 15c. \$  | 110.00    |
| 15d. Other insurance. Specify: _____   | 15d. \$  | 0.00      |
| <b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: <u>Taxes</u>   |          |           |
|  | 16. \$   | 100.00    |
| <b>17. Installment or lease payments:</b>  |          |           |
| 17a. Car payments for Vehicle 1  | 17a. \$  | 0.00      |
| 17b. Car payments for Vehicle 2  | 17b. \$  | 0.00      |
| 17c. Other. Specify: _____   | 17c. \$  | 0.00      |
| 17d. Other. Specify: _____   | 17d. \$  | 0.00      |
| <b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</b>   |          |           |
|  | 18. \$   | 0.00      |
| <b>19. Other payments you make to support others who do not live with you.</b>   |          |           |
|  | \$       | 0.00      |
| Specify: _____   |          |           |
| <b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>   |          |           |
| 20a. Mortgages on other property   | 20a. \$  | 0.00      |
| 20b. Real estate taxes   | 20b. \$  | 0.00      |
| 20c. Property, homeowner's, or renter's insurance  | 20c. \$  | 0.00      |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. \$  | 0.00      |
| 20e. Homeowner's association or condominium dues   | 20e. \$  | 0.00      |
| <b>21. Other: Specify:</b> _____   | 21. +\$  | 0.00      |
| <b>22. Your monthly expenses.</b> Add lines 4 through 21.<br>The result is your monthly expenses.  | 22. \$   | 18,855.14 |
| <b>23. Calculate your monthly net income.</b>  |          |           |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a. \$  | 17,395.47 |
| 23b. Copy your monthly expenses from line 22 above.  | 23b. -\$ | 18,855.14 |
| <b>23c. Subtract your monthly expenses from your monthly income.</b><br>The result is your <i>monthly net income</i> .   | 23c. \$  | -1,459.67 |
| <b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b><br>For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |          |           |
| <input type="checkbox"/> No.   |          |           |
| <input checked="" type="checkbox"/> Yes. Increased education costs for child   |          |           |
| Explain: _____   |          |           |

06 Declaration (Official Form 6 - Declaration), (12/07)

**United States Bankruptcy Court**  
**Eastern District of North Carolina - Wilmington Division**

In re Barry A. Moore  
Doris T. Moore

Debtor(s)

Case No. 15-01059-5-SWH  
Chapter 11

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 32 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date March 18, 2015

Signature

[Signature]  
Barry A. Moore  
Debtor

Date March 18, 2015

Signature

[Signature]  
Doris T. Moore  
Joint Debtor

**Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.**

Fill in this information to identify your case:

Debtor 1 Barry A. MooreDebtor 2 Doris T. Moore  
(Spouse, if filing)United States Bankruptcy Court for the: Eastern District of North Carolina -  
Wilmington DivisionCase number 15-01059-5-SWH  
(if known)☐ Check if this is an amended filing**Official Form 22B****Chapter 11 Statement of Your Current Monthly Income**

12/14

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

**Part 1: Calculate Your Average Monthly Income****1. What is your marital and filing status? Check one only.**

- ☐ Not married. Fill out Column A, lines 2-11.
- ☒ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☐ Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

**Column A  
Debtor 1****Column B  
Debtor 2**

|   |                     |                             |
|---|---------------------|-----------------------------|
| <b>2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).</b>   | \$ <u>16,219.60</u> | \$ <u>2,528.13</u>          |
| <b>3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.</b>   | \$ <u>0.00</u>      | \$ <u>0.00</u>              |
| <b>4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.</b> | \$ <u>0.00</u>      | \$ <u>0.00</u>              |
| <b>5. Net income from operating a business, profession, or farm</b>   |                     |                             |
| Gross receipts (before all deductions)  | \$ <u>0.00</u>      |                             |
| Ordinary and necessary operating expenses   | -\$ <u>0.00</u>     |                             |
| Net monthly income from a business, profession, or farm   | \$ <u>0.00</u>      | Copy here -> \$ <u>0.00</u> |
| <b>6. Net income from rental and other real property</b>  |                     |                             |
| Gross receipts (before all deductions)  | \$ <u>0.00</u>      |                             |
| Ordinary and necessary operating expenses   | -\$ <u>0.00</u>     |                             |
| Net monthly income from rental or other real property   | \$ <u>0.00</u>      | Copy here -> \$ <u>0.00</u> |

Debtor 1 **Barry A. Moore**  
Debtor 2 **Doris T. Moore**Case number (if known) **15-01059-5-SWH**Column A  
Debtor 1Column B  
Debtor 2

7. Interest, dividends, and royalties

\$ 0.00 \$ 0.00

8. Unemployment compensation

\$ 0.00 \$ 0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ 0.00

For your spouse \$ 0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$ 0.00 \$ 1,304.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. \$

10b. \$ 0.00 \$ 0.00

10c. Total amounts from separate pages, if any.

+ \$ 0.00 \$ 0.00

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 16,219.60

+ \$ 3,832.13

= \$ 20,051.73

Total current monthly  
income**Part 2: Deduct any applicable marital adjustment**

12. Copy your total average monthly income from Line 11.

\$ 20,051.73

13. Calculate the marital adjustment. Check one:

☐ You are not married. Fill in 0 in line 13d.☒ You are married and your spouse is filing with you. Fill in 0 in line 13d.☐ You are married and your spouse is NOT filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13 d.

13a. \$

13b. \$

13c. + \$

13d. Total \$

Copy here. =&gt; 13d. - 0.00

14. Your current monthly income. Subtract line 13d from line 12.

14. \$ 20,051.73

Debtor 1  
Debtor 2

Barry A. Moore  
Doris T. Moore

Case number (if known) 15-01059-5-SWH

Part 3. Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

x

Barry A. Moore  
Signature of Debtor 1

x

Doris T. Moore  
Signature of Debtor 2

Date March 18, 2016  
MM/DD/YYYY

Date March 18, 2016  
MM/DD/YYYY

B7 (Official Form 7) (04/13)

**United States Bankruptcy Court**  
**Eastern District of North Carolina - Wilmington Division**

In re Barry A. Moore  
Doris T. Moore

Debtor(s)

Case No. 15-01059-5-SWH  
 Chapter 11

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

**1. Income from employment or operation of business**

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|              |                               |
|--------------|-------------------------------|
| AMOUNT       | SOURCE                        |
| \$34,421.00  | 1/1/2015 to 2/25/2015 (Barry) |
| \$5,737.50   | 1/1/2015 to 2/25/2015 (Doris) |
| \$171,613.03 | 2014 (estimated)              |
| \$285,267.00 | 2013                          |

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**2. Income other than from employment or operation of business**None  
☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|              |  |
|--------------|--|
| AMOUNT       | SOURCE   |
| \$8,774.00   | 1/1/2015 to 2/25/2015 - Barry - Social Security benefits |
| \$2,608.00   | 1/1/2015 to 2/25/2015 - Doris - Retirement benefits      |
| \$15,648.00  | 2014 - Doris retirement                                  |
| \$0.00       | 2014 - Barry (Unknown)                                   |
| \$216,331.00 | 2013: Interest- \$ 2,228.00                              |
|              | Refunds-\$27,315.00                                      |
|              | Pensions/Annuities-\$30,604.00                           |
|              | Rents-\$153,075.00                                       |
|              | Tuition Prog/Health Savings Acct-\$3,109.00              |

**3. Payments to creditors**None  
☐**Complete a. or b., as appropriate, and c.**

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS<br>OF CREDITOR | DATES OF<br>PAYMENTS | AMOUNT PAID | AMOUNT STILL<br>OWING |
|---------------------------------|----------------------|-------------|-----------------------|
|---------------------------------|----------------------|-------------|-----------------------|

None  
☐

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF<br>PAYMENTS/<br>TRANSFERS | AMOUNT<br>PAID OR<br>VALUE OF<br>TRANSFERS | AMOUNT STILL<br>OWING |
|------------------------------|------------------------------------|--|-----------------------|
|------------------------------|------------------------------------|--|-----------------------|

None  
☐

c. *All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR AND<br>RELATIONSHIP TO DEBTOR | DATE OF PAYMENT | AMOUNT PAID | AMOUNT STILL<br>OWING |
|--|-----------------|-------------|-----------------------|
|--|-----------------|-------------|-----------------------|

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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**4. Suits and administrative proceedings, executions, garnishments and attachments**

None

- ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT<br>AND CASE NUMBER  | NATURE OF<br>PROCEEDING | COURT OR AGENCY<br>AND LOCATION         | STATUS OR<br>DISPOSITION |
|---|-------------------------|---|--------------------------|
| WM Capital Partners XXXVIII, LLC v. ACT Medical Group, P.A., Barry A. Moore and Doris T. Moore, 13 CVS 4645 | Collection              | New Hanover County Civil Superior Court | Judgment 14 T 0068       |
| Dept. of Treasury IRS v. Barry A. and Doris T. Moore, 13 M 0061   | Tax Lien                |   | Judgment                 |
| Dept. of Treasury IRS v. Barry A. and Doris T. Moore, 13 M 0271   | Tax Lien                |   | Judgment                 |
| N.C. Dept. of Revenue v. Barry A. and Doris T. Moore, 14 M 0155   | Tax lien                |   | Judgment                 |
| Dept. of Treasury IRS v. Barry A. Moore   | Tax Lien                |   | 14 M 0189                |
| Jeff D. Rogers, Fiduciary V. Barry A. and Doris T. Moore, 15 SP 0032  | Foreclosure             | Pender Co.                              | Pending                  |
| Catherine Anderson v. Barry A. Moore, 12 CVM 2321   | Collection              | Onslow County                           | Dismissed                |
| Raymond A. D'Angelo v. Precision Health Care and Dr. Berry Moore, RA, 14 CVD 003543                         | Collection              | New Hanover Co. Superior Court          | Judgment                 |

None

- ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON FOR WHOSE<br>BENEFIT PROPERTY WAS SEIZED | DATE OF SEIZURE | DESCRIPTION AND VALUE OF<br>PROPERTY |
|---|-----------------|--------------------------------------|
|---|-----------------|--------------------------------------|

**5. Repossessions, foreclosures and returns**

None

- ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF<br>CREDITOR OR SELLER  | DATE OF REPOSSESSION,<br>FORECLOSURE SALE,<br>TRANSFER OR RETURN | DESCRIPTION AND VALUE OF<br>PROPERTY  |
|--|--|---|
| Mercedes Benz Financial<br>ATTN: Manager or Agent<br>P. O. Box 961<br>Roanoke, TX 76262-0961 | Approximately July, 2014   | Mercedes Benz   |
| Pinnacle Recovery, Inc.<br>Attn: Manager or Agent<br>P.O. Box 130848<br>Carlsbad, CA 92013   | Approximately August, 2014                                       | Surrender of 3 timeshare contracts for Wyndham Vacation Resort properties in Hawaii |



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**6. Assignments and receiverships**

- None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF ASSIGNMENT OR SETTLEMENT |
|------------------------------|--------------------|-----------------------------------|
|------------------------------|--------------------|-----------------------------------|

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CUSTODIAN | NAME AND LOCATION OF COURT<br>CASE TITLE & NUMBER | DATE OF ORDER | DESCRIPTION AND VALUE OF PROPERTY |
|-------------------------------|---|---------------|-----------------------------------|
|-------------------------------|---|---------------|-----------------------------------|

**7. Gifts**

- None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON OR ORGANIZATION | RELATIONSHIP TO DEBTOR, IF ANY | DATE OF GIFT | DESCRIPTION AND VALUE OF GIFT |
|--|--------------------------------|--------------|-------------------------------|
|--|--------------------------------|--------------|-------------------------------|

**8. Losses**

- None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|-----------------------------------|--|--------------|
|-----------------------------------|--|--------------|

**9. Payments related to debt counseling or bankruptcy**

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE  | DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|--|---|--|
| Stubbs & Perdue, P.A.<br>310 Craven Street<br>PO Box 1654<br>New Bern, NC 28563-1654 | 2/9/2015, Paid by Phyllis H. Moore, et al Trust     | \$1,717.00   |

\* See additional information contained in the Affidavit attached to the Application for Employment of Attorney for the Debtor.

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**10. Other transfers**

- None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFEREE,<br>RELATIONSHIP TO DEBTOR | DATE                            | DESCRIBE PROPERTY TRANSFERRED<br>AND VALUE RECEIVED   |
|---|---------------------------------|---|
| Lindsey Moore Fetter<br><br>Daughter                      | Approximately February,<br>2013 | Co-signed for the purchase of a 2010 Ford MP, VIN 85533 for his daughter and conveyed his interest in the vehicle to her. |

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

| NAME OF TRUST OR OTHER<br>DEVICE | DATE(S) OF<br>TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND<br>VALUE OF PROPERTY OR DEBTOR'S INTEREST<br>IN PROPERTY |
|----------------------------------|---------------------------|---|
|----------------------------------|---------------------------|---|

**11. Closed financial accounts**

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR<br>DIGITS OF ACCOUNT NUMBER,<br>AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE<br>OR CLOSING |
|---------------------------------|--|---------------------------------------|
|---------------------------------|--|---------------------------------------|

**12. Safe deposit boxes**

- None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF BANK<br>OR OTHER DEPOSITORY | NAMES AND ADDRESSES<br>OF THOSE WITH ACCESS<br>TO BOX OR DEPOSITORY | DESCRIPTION<br>OF CONTENTS | DATE OF TRANSFER OR<br>SURRENDER, IF ANY |
|---|---|----------------------------|--|
|---|---|----------------------------|--|

**13. Setoffs**

- None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|
|------------------------------|----------------|------------------|

**14. Property held for another person**

- None ☒ List all property owned by another person that the debtor holds or controls.

| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|---------------------------|-----------------------------------|----------------------|
|---------------------------|-----------------------------------|----------------------|

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**15. Prior address of debtor**

- None ☐ If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

**16. Spouses and Former Spouses**

- None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

| NAME AND ADDRESS OF GOVERNMENTAL UNIT | DOCKET NUMBER | STATUS OR DISPOSITION |
|---------------------------------------|---------------|-----------------------|
|---------------------------------------|---------------|-----------------------|

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**18. Nature, location and name of business**

None

- ☐ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

| NAME                                 | LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN TIN: | ADDRESS                                     | NATURE OF BUSINESS                         | BEGINNING AND ENDING DATES |
|--------------------------------------|---|---|--|----------------------------|
| ACT Medical Group, P.A.              | 56-2090797  | 311-4 E Judges Road<br>Wilmington, NC 28405 | Medical practice                           | 4/28/1998 to 10/3/2014     |
| Mental Properties, LLC               | 27-0463463  | 311-4E Judges Road<br>Wilmington, NC 28405  | Rental real estate                         | 6/29/2009 to current       |
| Precision Health Care Services, Inc. | 20-8897274  | 311-4E Judges Road<br>Wilmington, NC 28405  | Health care services                       | 6/13/2007 to current       |
| CapeSide Addiction Care, PLLC        | 47-1268262  | 311-4E Judges Road<br>Wilmington, NC 28405  | Provider of medical services to the public | 7/23/2014 to current       |
| CapeSide Psychiatry, PLLC            | 47-1332854  | 311-4E Judges Road<br>Wilmington, NC 28405  | Provider of medical services to the public | 7/23/2014 to current       |
| ACT Health Management Services, LLC  | 27-2660631  | 311-4E Judges Road<br>Wilmington, NC 28405  | Management services organization           | 7/1/2010 to 8/22/2014      |

None

- ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

**19. Books, records and financial statements**

None

- ☐ a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS  
Hugh Sawyer, CPA  
P.O. Box 110139  
Bradenton, FL 34211

DATES SERVICES RENDERED  
2011 to current

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NAME AND ADDRESS  
Donna Meacham, CPA  
Attn: Manager or Agent  
5653 Carolina Beach Rd.  
Wilmington, NC 28412

DATES SERVICES RENDERED  
2013 to current

- None ☒ b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

| NAME | ADDRESS | DATES SERVICES RENDERED |
|------|---------|-------------------------|
|------|---------|-------------------------|

- None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

| NAME | ADDRESS |
|------|---------|
|------|---------|

- None ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

| NAME AND ADDRESS   | DATE ISSUED     |
|--|-----------------|
| BB&T<br>ATTN: Jack R. Hayes<br>PO Box 1847<br>Wilson, NC 27894-1847        | 2014            |
| Yadkin Bank<br>Attn: Mgr or Agent<br>206 High House Road<br>Cary, NC 27513 | 2014            |
| PNC Bank<br>Attn: J.Caleb Thomas<br>P.O. Box 389<br>Raleigh, NC 27602      | 2014            |
| N.C. Department of Revenue   | November, 2014  |
| Internal Revenue Service   | September, 2014 |

## 20. Inventories

- None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

| DATE OF INVENTORY | INVENTORY SUPERVISOR | DOLLAR AMOUNT OF INVENTORY<br>(Specify cost, market or other basis) |
|-------------------|----------------------|---|
|-------------------|----------------------|---|

- None ☒ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

| DATE OF INVENTORY | NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY<br>RECORDS |
|-------------------|---|
|-------------------|---|

## 21. Current Partners, Officers, Directors and Shareholders

- None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

| NAME AND ADDRESS | NATURE OF INTEREST | PERCENTAGE OF INTEREST |
|------------------|--------------------|------------------------|
|------------------|--------------------|------------------------|

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- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

| NAME AND ADDRESS | TITLE | NATURE AND PERCENTAGE OF STOCK OWNERSHIP |
|------------------|-------|--|
|------------------|-------|--|

**22 . Former partners, officers, directors and shareholders**

- None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

| NAME | ADDRESS | DATE OF WITHDRAWAL |
|------|---------|--------------------|
|------|---------|--------------------|

- None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

| NAME AND ADDRESS | TITLE | DATE OF TERMINATION |
|------------------|-------|---------------------|
|------------------|-------|---------------------|

**23 . Withdrawals from a partnership or distributions by a corporation**

- None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

| NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR | DATE AND PURPOSE OF WITHDRAWAL | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|---|--------------------------------|--|
|---|--------------------------------|--|

**24. Tax Consolidation Group.**

- None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

| NAME OF PARENT CORPORATION | TAXPAYER IDENTIFICATION NUMBER (EIN) |
|----------------------------|--------------------------------------|
|----------------------------|--------------------------------------|

**25. Pension Funds.**

- None ☐ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

| NAME OF PENSION FUND | TAXPAYER IDENTIFICATION NUMBER (EIN) |
|----------------------|--------------------------------------|
|----------------------|--------------------------------------|

\* \* \* \* \*

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**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date March 18, 2015

Signature

Barry A. Moore  
Barry A. Moore  
Debtor

Date March 18, 2015

Signature

Doris T. Moore  
Doris T. Moore  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*